Sc	PAGE 1 OF 11 FOR SE OF FORM 24/48			
Р	NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California Affiliates of California			
Check if 24-hour report X 48-hour report New report Amends report filed on				
	Full Name of Payee Ambrosino Muir Hansen Crounse (AMHC)	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 501 Sansome Street, Suite 404	Amount		
	City State Zip Code San Francisco CA 94111	10000.00 Transaction ID : PDT.E.10		
	Purpose of Expenditure Mailers; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Name of Federal Candidate Support	Office Sought:		
	Calendar Year-To-Date Per Election for Office Sought 110087.47	Disbursement For: Primary		
	Full Name of Payee Ambrosino Muir Hansen Crounse (AMHC)	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 501 Sansome Street, Suite 404	Amount		
	City State Zip Code San Francisco CA 94111	Transaction ID : PDT.E.21 Date of Disbursement or Obligation		
	Purpose of Expenditure Mailers; 9/1-9/30 (estimate) Category/ Type 24A	09 / 01 / 2014		
	Name of Federal Candidate Support Jeff Gorell Oppose	Office Sought: House District: 26 President Senate State: CA		
	Calendar Year-To-Date Per Election for Office Sought	Disbursement For:		
	(a) SUBTOTAL of Itemized Independent Expenditures	20000.00		
	(b) SUBTOTAL of Unitemized Independent Expenditures	•		
	(c) TOTAL Independent Expenditures	·		
١	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	Kathleen Cogan [Electronically Filed] Date Signature	08 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48	
AME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
Protecting Choice in California, a project of Planned Parenthood Affiliates of California	C C00556860	
	M M / D D / Y Y Y Y	
check if 24-hour report X 48-hour report New report Amends report filed		
Full Name of Payee Blueprint Interactive	Date of Public Distribution/Dissemination	
Bideprint interactive	09	
Mailing Address 1155 Connecticut Avenue, NW	Amount	
Suite 601	Amount	
City State Zip Code	6000.00	
Washington DC 20036	Transaction ID : PDT.E.11 Date of Disbursement or Obligation	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Category/ Type 24A	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office	Sought: X House District: 26	
Julia Brownley Oppose	President Senate State: CA	
140007.47	rsement For: Primary X General	
Per Election for Office Sought	Other (specify) ▶	
Full Name of Payee Blueprint Interactive	Date of Public Distribution/Dissemination	
Bideprint interactive	09 01 7 2014	
Mailing Address 1155 Connecticut Avenue, NW	Amount	
Suite 601	Amount	
City State Zip Code	6000.00	
Washington DC 20036	Transaction ID : PDT.E.22	
Washington DC 20036	Date of Disbursement or Obligation	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Category/ Type 24A		
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Category/ Type 24A Name of Federal Candidate Support Office	Date of Disbursement or Obligation Mo9 / 01 / 2014 Sought: X House District: 26	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Support Office	Date of Disbursement or Obligation M 09	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Category/ Type 24A Name of Federal Candidate Jeff Gorell Oppose	Date of Disbursement or Obligation Moy / Dol / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Support Office Calendar Year-To-Date	Date of Disbursement or Obligation M	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Support Office Calendar Year-To-Date	Date of Disbursement or Obligation M	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Office Support Office Calendar Year-To-Date Per Election for Office Sought Category/ Type 24A Disbut 2014	Date of Disbursement or Obligation Mo9	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Office Support Office Calendar Year-To-Date Per Election for Office Sought Category/ Type 24A Disbut 2014	Date of Disbursement or Obligation Mo9	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Disbut 2014 (a) SUBTOTAL of Itemized Independent Expenditures.	Date of Disbursement or Obligation Mo9	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Category/ Type 24A Office Support Oppose Calendar Year-To-Date Per Election for Office Sought 110087.47 Disbut 2014 (a) SUBTOTAL of Itemized Independent Expenditures.	Date of Disbursement or Obligation Mo9	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Disbut 2014 (a) SUBTOTAL of Itemized Independent Expenditures.	Date of Disbursement or Obligation Mog	
Purpose of Expenditure Online Ads; 9/1-9/30 (estimate) Name of Federal Candidate Jeff Gorell Calegory/ Type Support Oppose Calendar Year-To-Date Per Election for Office Sought Disbut 2014 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either	Date of Disbursement or Obligation Mod	

Schedule E)	PAGE 3 OF 11 FOR SE OF FORM 24/48		
Affiliates of California Affiliates of California Affiliates of California FEC IDENTIFICATION NUMBER ▼ C C00556860			
Check if 24-hour report X 48-hour report Amends report filed on M M / D D / Y Y Y Y Y			
Full Name of Payee Lake Research Partners, Inc.	Date of Public Distribution/Dissemination 09 01 02014		
Mailing Address 4930 South Holly Street	Amount		
City State Zip Code Seattle WA 98118	8689.24 Transaction ID : PDT.E.12		
Purpose of Expenditure Research; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation 09 01 2014		
Name of Federal Candidate X Support	ice Sought: House District: 26 President Senate State: CA		
	bursement For: Primary X General		
Full Name of Payee Lake Research Partners, Inc.	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 4930 South Holly Street	Amount		
City State Zip Code Seattle WA 98118	6310.00 Transaction ID : PDT.E.13 Date of Disbursement or Obligation		
Purpose of Expenditure Polling; 9/1-9/30 (estimate) Category/ Type 24A	09 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate X Support	ice Sought: House District: 26 President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought Dis 20'	bursement For: Primary General Other (specify) Other		
(a) SUBTOTAL of Itemized Independent Expenditures.	14999.24		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.			
Kathleen Cogan [Electronically Filed] Signature	08 29 / 2014		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE 11 OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Protecting Choice in California, a project of Planned Parenthood C00556860 Affiliates of California X New report Check if 24-hour report X 48-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Lake Research Partners, Inc. 09 01 2014 Mailing Address 4930 South Holly Street Amount State Zip Code 8689.25 City WA 98118 Transaction ID: PDT.E.23 Seattle Date of Disbursement or Obligation Purpose of Expenditure Category/ Research; 9/1-9/30 (estimate) 24A 09 01 2014 Type Name of Federal Candidate X House 26 Office Sought: Support District: Jeff Gorell CA Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 110087.47 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Lake Research Partners, Inc. 2014 Mailing Address 4930 South Holly Street Amount City State Zip Code 6310.00 WA Transaction ID: PDT.E.24 98118 Seattle Date of Disbursement or Obligation Purpose of Expenditure Category/ 24A Polling; 9/1-9/30 (estimate) 2014 09 01 Type Name of Federal Candidate 26 Support Office Sought: X House District: Jeff Gorell CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 110087.47 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 14999.25 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Kathleen Cogan [Electronically Filed] 08 29 2014 Date Signature

Schedule E)	PAGE 5 OF 11 FOR SE OF FORM 24/48		
Affiliates of California Affiliates of California Affiliates of California Affiliates of California			
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee Planned Parenthood Affiliates of California	Date of Public Distribution/Dissemination 09 01 2014		
Mailing Address 555 Capitol Mall, Suite 510	Amount		
City State Zip Code Sacramento CA 95814	481.47 Transaction ID : PDT.E.14		
Purpose of Expenditure Staff Time and Travel for Research; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M M O O O O O O O O O O O O O O O O		
Name of Federal Candidate Support Office	e Sought: House District: 26 President Senate State: CA		
	ursement For: Primary X General		
Full Name of Payee Planned Parenthood Affiliates of California	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 555 Capitol Mall, Suite 510	Amount		
City State Zip Code Sacramento CA 95814	2851.59 Transaction ID : PDT.E.15 Date of Disbursement or Obligation		
Purpose of Expenditure Staff Time and Travel for Field Program; 9/1-9/30 (estimate) Category/ Type 24A	09 01 / 2014		
Name of Federal Candidate Support Office	e Sought: House District: 26 President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary X General 4 Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	3333.06		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
	08 29 2014		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Sc	chedule E)	FOR SE OF FORM 24/48
Ρ	ME OF COMMITTEE (In Full) rotecting Choice in California, a project of Planned Parenthood ffiliates of California	FEC IDENTIFICATION NUMBER ▼ C C00556860
Ch	eck if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
	Full Name of Payee Planned Parenthood Affiliates of California Mailing Address 555 Capitol Mall, Suite 510	Date of Public Distribution/Dissemination M
	City State Zip Code Sacramento CA 95814	600.00 Transaction ID : PDT.E.20 Date of Disbursement or Obligation
	Purpose of Expenditure Supplies for Field Office; 9/1-9/30 (estimate) Category/ Type 24A	09
	Name of Federal Candidate Support	President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary X General Other (specify) ▶
	Full Name of Payee Planned Parenthood Affiliates of California Mailing Address 555 Capitol Mall, Suite 510	Date of Public Distribution/Dissemination M M O O O O O O O O O O O O O O O O O
	City State Zip Code Sacramento CA 95814	481.46 Transaction ID : PDT.E.25
	Purpose of Expenditure Staff Time and Travel for Research; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Jeff Gorell Oppose	e Sought: House District: 26 President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought Disbrace 2014	ursement For: Primary
	(a) SUBTOTAL of Itemized Independent Expenditures	1081.46
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	Kathleen Cogan [Electronically Filed] Date	8 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	PAGE 7 OF 11 FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California Affiliates of California			
Check if 24-hour report X 48-hour report New report Amends report filed on			
Full Name of Payee Planned Parenthood Affiliates of California	Date of Public Distribution/Dissemination 09 01 2014		
Mailing Address 555 Capitol Mall, Suite 510	Amount		
City State Zip Code Sacramento CA 95814	2851.59 Transaction ID : PDT.E.26		
Purpose of Expenditure Staff Time and Travel for Field Program; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M M O O O O O O O O O O O O O O O O		
	e Sought: House District: 26		
Calendar Year-To-Date Disb	President Senate State: CA ursement For: Primary General		
Full Name of Payee	Other (specify) ▶ Date of Public Distribution/Dissemination		
Planned Parenthood Affiliates of California Mailing Address 555 Capitol Mall, Suite 510	M M M / D D / Y Y Y Y Y Y A Y A Amount		
City State Zip Code Sacramento CA 95814	600.00 Transaction ID : PDT.E.27		
Purpose of Expenditure Supplies for Field Office; 9/1-9/30 (estimate) Category/ Type 24A	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate Support Jeff Gorell Office Oppose	e Sought: House District: 26 President Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary		
(a) SUBTOTAL of Itemized Independent Expenditures	3451.59		
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 7 1 1 7 1 1 7 1		
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
Kathleen Cogan [Electronically Filed] Date	18 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

PAGE 11 OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Protecting Choice in California, a project of Planned Parenthood C00556860 Affiliates of California X New report Check if 24-hour report X 48-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination Political Data, Inc. 09 01 2014 Mailing Address P.O. Box 59570 Amount State Zip Code 2202.00 City CA 90652 Transaction ID: PDT.E.16 Norwalk Date of Disbursement or Obligation Purpose of Expenditure Category/ Data for Field Program; 9/1-9/30 (estimate) 24A 09 01 2014 Type Name of Federal Candidate X House 26 Office Sought: X Support District: Julia Brownley CA Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 110087.47 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Political Data, Inc. 2014 Mailing Address P.O. Box 59570 Amount City State Zip Code 2202.00 CA 90652 Transaction ID: PDT.E.28 Norwalk Date of Disbursement or Obligation Purpose of Expenditure Category/ 24A Data for Field Program; 9/1-9/30 (estimate) 2014 09 01 Type Name of Federal Candidate 26 Support Office Sought: X House District: Jeff Gorell CA Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 110087.47 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 4404.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Kathleen Cogan [Electronically Filed] 08 29 2014 Date Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protecting Choice in California, a project of Planned Parenthood Affiliates of California	C C00556860
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Verizon	09 / 01 / 2014
Mailing Address P.O. Box 920041	Amount
City State Zip Code	75.00
Dallas TX 75392	Transaction ID : PDT.E.17 Date of Disbursement or Obligation
Purpose of Expenditure Internet for Field Office; 9/1-9/30 (estimate) Category/ Type 24A	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 26
Julia Brownley Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Verizon	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 920041	Amount
City State Zip Code	75.00
Dallas TX 75392	Transaction ID : PDT.E.29 Date of Disbursement or Obligation
Purpose of Expenditure Internet for Field Office; 9/1-9/30 (estimate) Category/ Type 24A	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought:
Jeff Gorell Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For: Primary General Other (specify)
(a) SUPTOTAL of Itomized Independent Expanditures	150.00
(a) SUBTOTAL of Itemized Independent Expenditures	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	08 29 2014
Signature	

Schedule E)	PAGE 10 OF 11 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood FEC IDENTIFICATION NUMBER ▼		
Affiliates of California	C C00556860	
Check if 24-hour report X 48-hour report New report Amends report	filed on	
Full Name of Payee Wagaman Strategies	Date of Public Distribution/Dissemination	
Mailing Address 886 Metal Lane	09 01 2014 Amount	
City. State 7in Code	1250.00	
City State Zip Code West Sacramento CA 95691	1250.00 Transaction ID : PDT.E.18	
Purpose of Expenditure Consulting; 9/1-9/30 (estimate) Category/ 24A	Date of Disbursement or Obligation 09 01 2014	
Type 247	09 01 2014	
	Office Sought:	
Julia Brownley Oppose	President Senate State: CA	
Calcilidat to all to bate	Disbursement For: Primary General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Wagaman Strategies	09 01 2014	
Mailing Address 886 Metal Lane	Amount	
City State Zip Code	1250.00	
West Sacramento CA 95691	Transaction ID : PDT.E.30 Date of Disbursement or Obligation	
Purpose of Expenditure Consulting; 9/1-9/30 (estimate) Category/ Type 24A	09 / 01 / 2014	
Name of Federal Candidate Support C	Office Sought: X House District: 26	
Jeff Gorell Oppose	President Senate State: CA	
	Disbursement For: Primary ☐ General Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	2500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.		
Kathleen Cogan [Electronically Filed] Date	08 29 2014	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Protecting Choice in California, a project of Planned Parenthood	
Affiliates of California	C C00556860
Check if 24-hour report X 48-hour report New report Amends report to	filed on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
James Wisley	M M / D D / Y Y Y Y
Mailing Address 1570 Prospect Avenue	09 01 2014 Amount
	Amount
City State Zip Code	625.00
Hermosa Beach CA 90254	Transaction ID: PDT.E.19 Date of Disbursement or Obligation
Purpose of Expenditure Consulting; 9/1-9/30 (estimate) Category/ Type 24A	09 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support C	office Sought: X House District: 26
Julia Brownley Oppose	President Senate State: CA
Calcilian Tour to Bato	oisbursement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
James Wisley	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1570 Prospect Avenue	09 01 2014
	Amount
City State Zip Code	625.00
Hermosa Beach CA 90254	Transaction ID : PDT.E.31 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/ Category/	M M / D D / Y Y Y Y
Consulting; 9/1-9/30 (estimate)	09 01 2014
Name of Federal Candidate Support C	Office Sought:
Jeff Gorell Oppose	President Senate State: CA
	Disbursement For: Primary X General
Per Election for Office Sought	Other (specify) Other
(a) SUBTOTAL of Itemized Independent Expenditures	1250.00
(a) SOBTOTAL of Retrized independent Experiditures	1250.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	78168.60
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
Kathleen Cogan [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature Date	08 29 2014